



# New Comprehensive GIC Coordinator Manual!

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*The information you need to process  
GIC benefits*





# *GIC Benefit Administration*

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What's New, Different, Important...

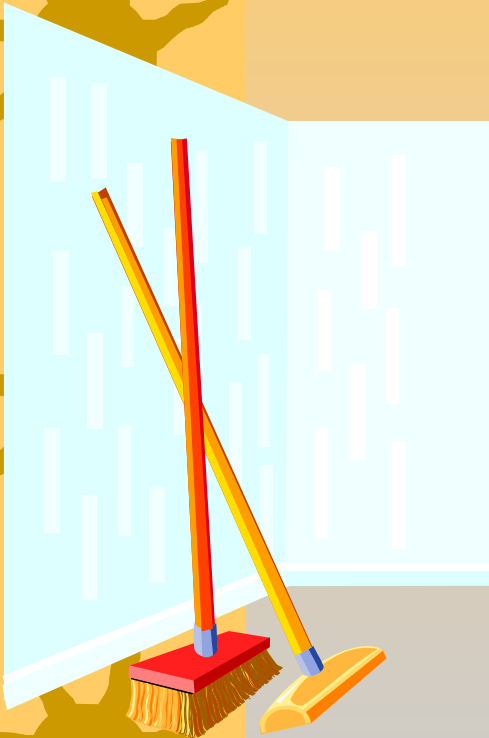




# *Starting at the Back First - Forms*

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- ★ Spring cleaning time – go through your file drawers and discard old forms
- ★ Check dates on the bottom of the form to be sure you have the most current version
- ★ Forms are on our web site; keep Acrobat Reader current
- ★ Coordinators must photocopy forms for agency supply – GIC will no longer supply forms





## *Forms - continued*

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- ★ New Form-11 shipped with manual – include with manual
- ★ File LTD Coordinator manual with GIC Coordinator manual – new version with three-hole punch shipped by CNA
- ★ Beneficiary Forms – NOT on web site to deter fraud
- ★ Retiree Dental on web site and through the GIC



# ★ GIC Insurance Enrollment and Change (Form-1)

- 3/03 or 11/02 date – both are current version
- Reflects new Late Enrollment procedure for Life Insurance
- 39-week and Deferred Retirement options incorporated – no separate forms



# Forms - continued

## ★ New Employee Acknowledgment Form

- 1/1/03
- Protects agencies from future liability
- Required of new hires and employees electing GIC benefits for the first time
- Retained in employee's personnel file – Do not send this form to the GIC

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**Your BenefitsConnection**  
Group Insurance Commission

### Employee Acknowledgement Form

You are responsible for familiarizing yourself with your benefit options:

- Basic Life Insurance
- Basic Life & Health Insurance
- Optional Life Insurance
- Long Term Disability (LTD)
- Dental/Vision (if eligible)
- Health Care Spending Account (HCSA)
- Dependent Care Assistance Program (DCAP)

Your signature is required on this form before your agency can process your benefit elections. Please sign, date and return this form to your GIC Coordinator after you have reviewed the Benefit Decision Guide. (Or for visually impaired employees, have listened to the BDG audio tape.)

I hereby acknowledge that I have reviewed the most recent GIC Benefit Decision Guide before I made my benefit elections.

Name: \_\_\_\_\_  
(Please print)

Signature: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date: \_\_\_\_\_

Employee: Return this signed form to your GIC Coordinator with your benefit elections.  
GIC Coordinator: Retain original signed form in employee's personnel file.

1/1/03



## *Forms - continued*

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### ★ Insurance Data Form (IDF)

- 2/02 – now 4/03
- New form with revised Indemnity Plan names on web site and distributed today



### ★ Beneficiary Form

- 319 – one to three beneficiaries (1/2003)
- G-500 – three or more beneficiaries or special designations, such as trusts and estates (12/02)





# *Forms – continued*



- ★ Student Forms – 3 versions (1/03)
  - Indemnity – new name version on web site and distributed today
  - PPO
  - HMO
- ★ COBRA and Dependent COBRA (1/03)
- ★ COBRA Forms with 7/1 rates on web site (3/03)





## *Forms - continued*



- ★ Pre-Tax Opt Out of Participating (1/03) – during annual enrollment or status change only
  - No forms to opt in – see Payroll Department
- ★ Dental/Vision Form-1 – new 1-page format (11/02)
- ★ Dental/Vision COBRA 1/03 – with rates (3/03 on web site)
- ★ Form 11 – (10/02) – File in Forms section of manual
- ★ Retiree Dental App – on web site or through the GIC



# *HCSA and DCAP*



- ★ File HCSA Addendum with Coordinator manual
- ★ DCAP enrollment form in manual
- ★ HCSA enrollment form shipped by Sentinel and on our web site
- ★ HCSA/DCAP claim form – now combined and on web site
- ★ HCSA/DCAP Termination form – notify Sentinel when HCSA or DCAP enrollees terminate state service or have an unpaid leave of absence; form on web site



# *GIC Reports*

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- ★ Notify the GIC of Coordinator, address, and e-mail address changes – contact Operations Department (Winnie Yee ext. 3061)
- ★ Include Agency/Division Number (ABC/1234) with inquiries to expedite your request
- ★ *FYB* distribution is for enrollees only; others can download from web site
- ★ BDG for eligible employees only; prospective employees, non-eligible employees and others should download from web site

# Back to the Front – Your Role – Choosing a Health Plan

## HEALTH PLAN FEATURES

The following is a general outline of other plan features. Only you know how important each one is to you. Call the Plan for details.

Does the Plan have a place of residence requirement?

**YES**

PLUS, PPO & HMOs

**NO**

Indemnity

See page 16 for the plans in your area.

Service Area in Massachusetts

Indemnity

PLUS

PPO

HMOs – Depends on plan

See page 16 for plan coverage by county.

Out-of-state student coverage

Indemnity

PLUS

PPO

HMOs Limited to certain geographic areas – call HMOs for details

Emergency Room and Urgent Care covered by all plans

Out-of-state coverage

Indemnity

PLUS

PPO

HMOs emergency and pre-approved care only

Primary Care Physician (PCP) Required

**YES**

HMOs, PPO

**NO**

Indemnity, PLUS

PCP Referral to Specialist Required

**MOST**

HMOs, PPO

**NONE**

Indemnity, PLUS

Plan Authorization for Certain Procedures  
such as MRIs, Physical Therapy, and Hospitalization

**ALL PLANS**

Your Monthly Premium – See page 23 for premium details.

Indemnity

\$\$\$\$

PLUS

\$\$\$

PPO

\$\$

HMOs – Depends on Plan

## MANAGED CARE FEATURES IN ALL PLANS

All health plans offered through the Group Insurance Commission include one or more of the following managed care features:

**Networks** – Networks are groups of doctors, hospitals and other health care providers. Members treated by network providers usually receive the maximum level of benefits.

**Utilization Review** – With utilization review, health plan staff work with your providers to determine the treatment you need and where it is best provided. For example, you can be quite sick, but not need to be cared for in a hospital.

In today's medical world, there often are hospital alternatives, such as skilled nursing facilities, home health care and hospice care.

**Case Management** – With case management, health care clinicians are assigned to work with patients who have serious medical, psychiatric or substance abuse conditions that require extensive treatment or prolonged care (for example, multiple sclerosis, spinal cord injuries or AIDS). Case managers suggest and coordinate patients' treatment to enhance quality of care. Patients' families may be involved as well. The goal is to provide the best possible management of cases that present complex or long-term issues.

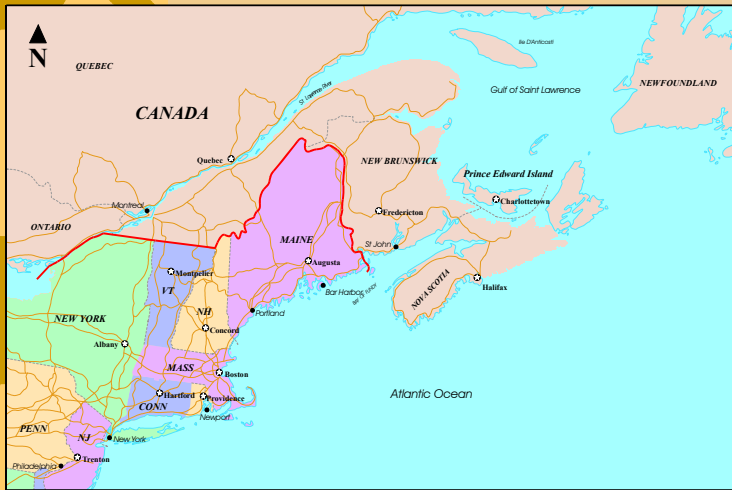
- ★ Use manual in conjunction with BDG
- ★ Never influence an employee's decision – needs vary from individual to individual
- ★ Learn differences and similarities between plans

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Your  
BenefitsConnection  
Group Insurance Commission



# *Your Role – Choosing a Plan - continued*



1994 MAGELLAN Geographic©2001 Santa Barbara, CA (909) 929-0147

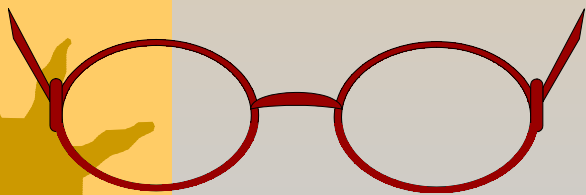
- ★ Keep in mind: PLUS=PPO without PCP
- ★ Indemnity has network out of state
- ★ Employees in CT, ME, NH, RI and VT should also consider PLUS, PPO, HPHC and Tufts – see BDG for locations



# *GIC Dental/Vision*



- ★ For Managers, the Legislature, Executive Office staff and Legislative staff only
- ★ Authorities, higher education, Judicial Trial Court not eligible







# Follow the Step-by-Step Instructions



Steps

Forms

## ANNUAL ENROLLMENT

### BASIC LIFE ONLY

Employees who want to enroll in Basic Life after the initial eligibility period has passed must wait for the next Annual Enrollment. To enroll:

- 1) Instruct the employee to complete and sign Insurance Enrollment and Change Form (Form-1).
- 2) Instruct the employee to complete the Employee Acknowledgement Form.
- 3) Review the Insurance Enrollment and Change Form (Form-1) for completeness and complete the agency section.
- 4) Enter the addition into the MAGIC system.
- 5) Photocopy Insurance Enrollment and Change Form (Form-1) and file it in the employee's personnel file.
- 6) Retain original Employee Acknowledgement Form in the employees personnel file.
- 7) Send the **original** Insurance Enrollment and Change Form (Form-1) to the GIC.

The employee will be automatically enrolled in pre-tax basic life and health insurance deductions unless he/she opts out of participating – see your payroll help desk for more information.

### BASIC LIFE AND HEALTH ENROLLMENT

If an employee is not currently enrolled in GIC coverage, complete the following by the end of annual enrollment:

- 1) To select their benefits, employees must complete the following forms completely and legibly:

- Insurance Enrollment and Change Form - (Form-1)
- Beneficiary Designation Form 319 (one to three beneficiaries) or Nomination of Beneficiary Form G-500 (four or more

beneficiaries or special designations e.g. estate and trust)

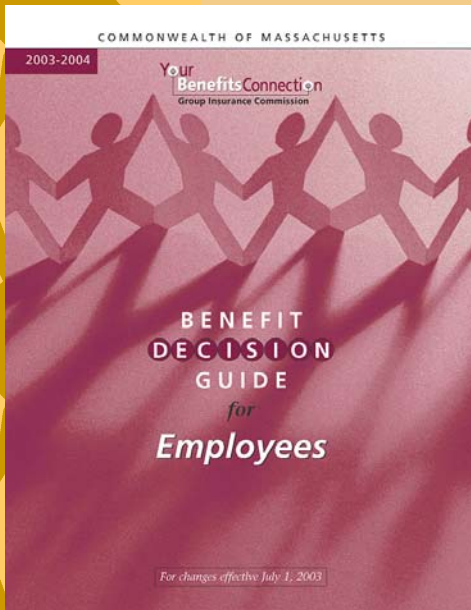
- Insurance Data Form (IDF) for family coverage. Must also provide:
  - For spousal coverage – copy of marriage certificate.
  - For former spouse – provide following sections of divorce decree: page with absolute date, signature page, health insurance language, and former spouse's address.
  - For dependent coverage under age 19 – copy of birth certificate(s) – the GIC must be able to link dependent to insured or spouse.
  - For dependent coverage age 19 or over – Student Verification form (Indemnity, PPO or HMO version) and a copy of birth certificate.
- Employee Acknowledgement form
- HMO or PPO Application - if one of these plans selected.
- If electing optional life insurance, the GIC will notify the life insurance carrier, which will send the employee a Medical Evidence of Insurability Application to complete and return. (If the medical application is approved, the GIC will advise you and the employee of the decision. The GIC will determine the effective date and will update the GIC's MAGIC system for premium deductions.)
- Dental and Vision Enrollment and Change Form (Form-1). If family coverage is not elected for health insurance, but the employee wishes to have family dental/vision coverage, he/she must also submit a copy of a marriage certificate to cover a spouse and birth certificates to cover dependent children. See eligibility rules in the

ANNUAL ENROLLMENT

Forms



# *New Hire*



- ★ Elections must be made within 10 calendar days of employment
- ★ Coordinators send forms to the GIC within 21 calendar days
- ★ Otherwise – medical requirement for LTD and Optional Life
- ★ New Hire can now apply for Optional Life Insurance of up to 8 times salary – as of 7/1/03 effective date
- ★ Give new employees COBRA notice





# *Family Status Changes*



- ★ **Divorce and Remarriage:**  
According to Mass General Law MGL-Chapter 32A, the GIC must be informed of divorce or remarriage. Failure to report may result in financial consequences to the employee or former spouse
- ★ **Employees must notify Coordinators; Coordinators are required to inform the GIC**



# *Family Status Changes - continued*

## Dependent Student




- ★ Unmarried dependent coverage ends at the end of the month a dependent turns age 19.
- ★ Full-time students may apply for student coverage and, if approved, must re-certify coverage twice/year



# *Employment Changes*



**PART  
TIME**

PAYCHECK	2000		
PAY TO THE ORDER OF	<table border="1"><tr><td></td><td></td></tr></table>		
			

See procedures for:

- ★ Hours reduced to less than part-time
- ★ Hours reinstated to part-time or more
- ★ Salary changes
- ★ Agency transfer



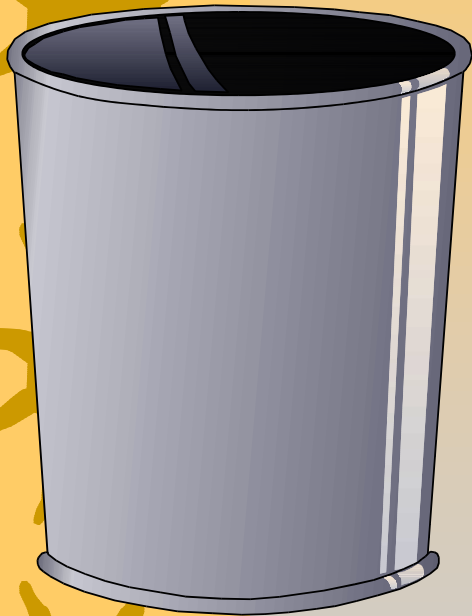
# *Late Enrollment*

Effective April 7, for coverage effective July 1, 2003 carriers will send medical applications.

Discard the following forms:

- ★ Life Insurance Medical Applications G6 and G6S
- ★ LTD Medical Application

Use Form-1 to add or change life and LTD coverage; the carrier will send the employee a medical application to complete and return





# *Annual Enrollment*

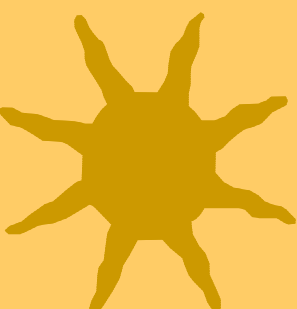


- ★ Enroll in basic life after initial eligibility
- ★ Enroll in basic life and health after initial eligibility
- ★ Change health plans
  - If enrolling in Fallon, indicate Direct or Select Care on Form-1
- ★ Enroll in Dental/Vision if eligible
- ★ Change smoker status for optional life (tobacco-free for at least 12 months)
- ★ Enroll in HCSA – this year only
- ★ Opt in or out of pre-tax premium deductions



# *Leave of Absence*

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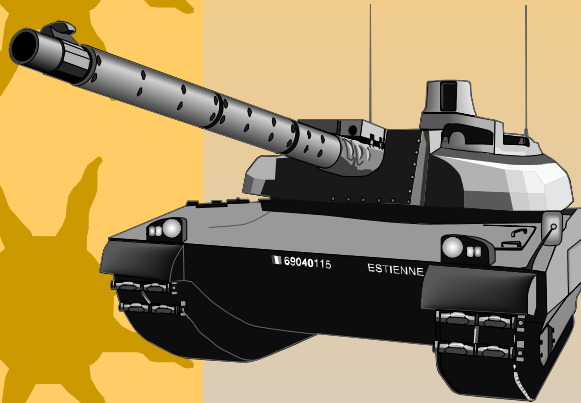
- ★ Apply for Leave without Pay at Part-cost for:
  - Industrial Accident
  - Maternity
  - Personal Illness (employee's illness)
- ★ Form 11 must be completed by employee, Agency Head and Physician before it can be processed



# *Leave of Absence*

## ★ Military Leave

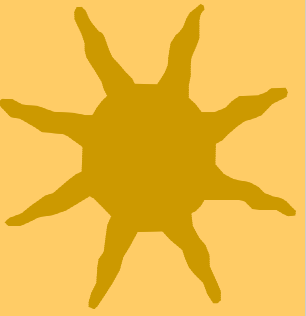
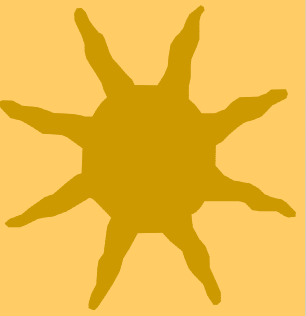
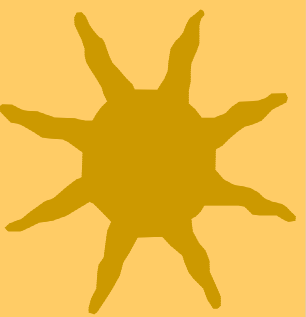
- Drop coverage and reinstate when return from duty
- Continue coverage on same terms as active employees – the GIC will bill the employee for his/her share of premium





# *Terminating State Service*

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- ★ Health options depend on length of state service
- ★ All employees terminating state service must be given Federal COBRA notice
- ★ LTD is over
- ★ DCAP/HCSA is over – must notify carrier; COBRA application will be available on web site mid-April
- ★ Dental/Vision is over – can apply for COBRA





# *Terminations – less than 10 years state service*

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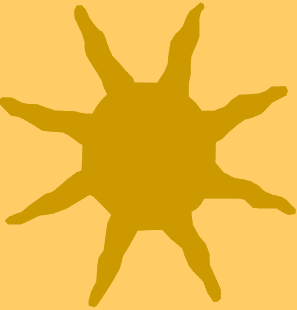
- ★ Health only under COBRA
- ★ Convert to Non-Group Health
- ★ Portability – life only
- ★ Convert to Non-Group Life





# *Terminations – 10 or more years state service under age 55*

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*If terminate state service at age 55 or over,  
employee can retire – see retirement section*



★ Deferred Retiree

- Life only
- Health and life

★ COBRA

★ Non-Group health

★ Portability – life only

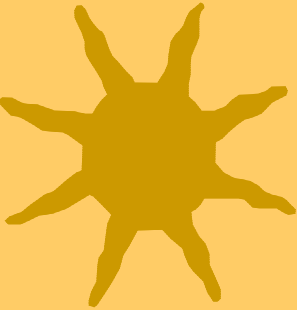
★ Non-Group life





# *Terminations – 20 or more years state service at any age*

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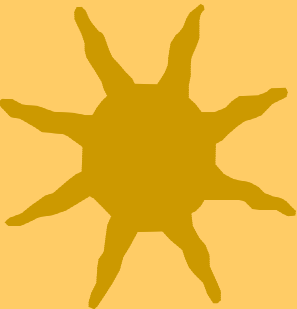


- ★ Retirement
- ★ Deferred Retirement

- Life only
- Life and health



- ★ COBRA
- ★ Non-Group health
- ★ Portability – life only
- ★ Non-Group life





# *Layoff – less than 10 years state service*

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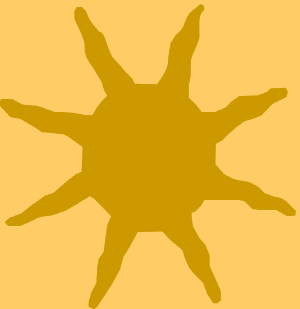
- ★ 39-week (switch to COBRA for remaining 9 months)



- ★ COBRA

- ★ Convert to non-group health

- ★ Portability – life only



- ★ Convert to non-group life



# *Layoff – 10 or more years state service under age 55*



*If laid off at age 55 or over, employee can retire – see retirement section*



- ★ **Deferred Retiree**

- Life only
- Life and health

- ★ **39-week**

- ★ **COBRA**

- ★ **Convert to non-group health**

- ★ **Portability – life only**

- ★ **Convert to non-group life**





# *Layoff – 20 or more years state service at any age*

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- ★ Retirement
- ★ Deferred Retirement
  - Life only
  - Health and life



- ★ 39-week
- ★ COBRA
- ★ Non-group health
- ★ Portability – life only
- ★ Non-group life

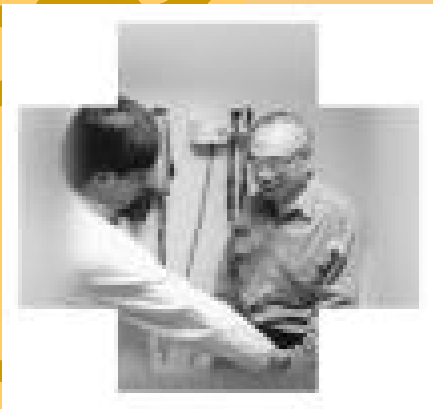




# *Employees Age 65 and Over*

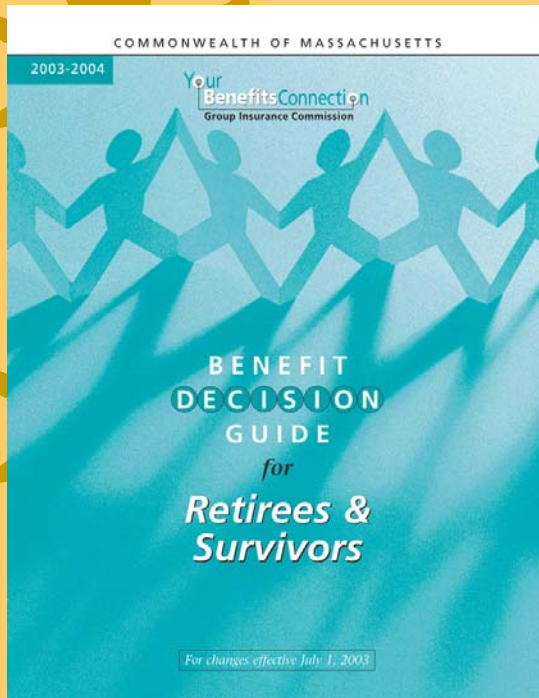
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- ★ Age 65 or over and still working – contact Social Security to find out if eligible for Medicare Part A. If eligible, employee and/or spouse must enroll in Medicare Part A only.





# *Retirement and GIC Benefits*



- ★ Employee must confirm eligibility with retirement board
- ★ Employee must apply for retirement benefits
- ★ Obtain Retiree/Survivor Guide





## *Retirement - continued*



- ★ Under age 65 with GIC coverage – may change health plans
- ★ Under age 65 without GIC coverage – may enroll in GIC coverage
- ★ Age 65 or over with or without GIC coverage and retired – contact Social Security to find out if eligible for Medicare Part A. If eligible, retiree and/or spouse **MUST** enroll in Medicare Part A and Part B. The GIC will contact the retiree about his/her health plan options.



# *Retirement - continued*



- ★ Optional Life – Instruct employee to review coverage and rate chart: cost increases with age and at retirement
- ★ Dental/Vision
  - COBRA – pick up Retiree Dental when COBRA over
  - Retiree Dental – Limited to \$750/member benefit
- ★ LTD over



# *DCAP – Dependent Care Assistance Program*

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- ★ Open enrollment is Nov-Dec for calendar year benefit
- ★ Change of status – can change contribution, add or terminate coverage
- ★ Notify carrier when employee leaves state service
- ★ Use or lose provision
- ★ See forms for eligibility details; IRS guidelines contact Sentinel
- ★ Offline agencies – contact carrier before offering to employees



# *HCSA (Health Care Spending Account)*

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★ Active employees can pay for non-covered health-related expenses on a pre-tax basis, reducing federal and state income taxes

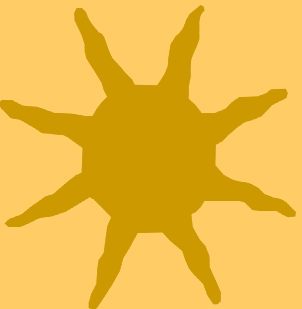


- ★ Must be medically related. Examples:
- Physician office and prescription drug co-pays
  - Medical deductibles and coinsurance
  - Eyeglasses/contact lenses not covered by health or vision plan
  - Orthodontia and dental benefits not covered by dental plan





# *HCSA – Health Care Spending Account - continued*



- ★ Must be eligible for GIC benefits – same coverage effective date as other GIC benefits
- ★ Special open enrollment for 6 months coverage beginning July 1, 2003
- ★ Open enrollment Nov-Dec for calendar year benefit
- ★ Change of status – can enroll, change contribution or terminate coverage
- ★ Use or lose provision
- ★ Offline agencies – contact Sentinel
- ★ IRS guidelines or termination procedures – contact Sentinel


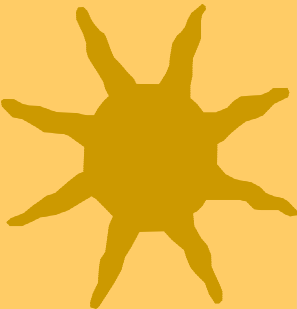


# *HIPAA – Health Insurance Portability and Accountability Act*

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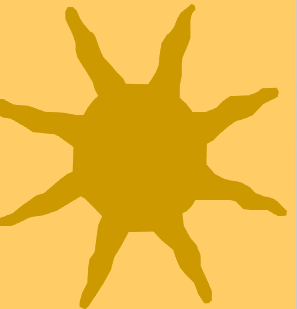
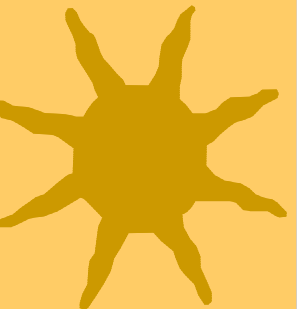


- ★ Goes into effect April 14, 2003 – Coordinators may no longer contact an employee's health plan to assist in resolving claim problems
- ★ Standardized health care industry transaction codes
- ★ Protects privacy of health information
- ★ Enrollees in Indemnity plans, PPO and Dental/Vision will receive privacy notice – also on GIC web site



*We Hope You Find the New  
Manuals Helpful and  
Informative*

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Questions? Contact the GIC's  
Operations Department 617-727-2310  
ext. 3062, 3060 or 3063

